PHIT Committee Meeting
January 30th, 2002
Kent – Center Pointe Plaza

In Attendance:

Frank Westrum	Greg Story	Joan Brewster
Sherri McDonald	Jim Minty	Jo Hofmann
Torney Smith	Phillip Ewert	Mark Oberle
Greg Smith	Patrick O'Carroll	Cindy Dilk
Brent Veenstra	Christy Spice	Amy Culp
Mary Ann O'Garro	Jim Hammond	
Kathy Carson	Vicki Hohner	

Opening – CIO role discussion: Frank Westrum

Frank introduced himself as the new CIO, described his vision and mission for his role in DOH. Hopes to include more customer service into IT, and to bring back into focus the need to work with Public Health. He plans on doing this by increasing communication and reminding everyone to work together as DOH instead of individuals. Public Health is why we are doing our jobs. IT is a very important tool and it is there assist Public Health. Many at the table agreed with the attitude of Frank. Patrick, representing UW expressed his concern with not treating IT as another 'species' (IT or on IT) -they bring more to the table than the ability to hook up your PC.

Barriers are thinking 'that can't be done', or 'we can't do that'. All agree that the barriers need to be overcome somehow. Communications seems to be the key to doing this. Not only within DOH but with the LHJ's communicating with each other, and preventing the reinvention of the wheel, when it comes to problem solving.

VISTA – Christy Spice / Phillip Ewert

VISTA has recently been updated to web based form. The new version runs faster with fewer problems. It is usually used primarily by Public Health Staff. It is accessible through www.vistaphw.net DOH data is password protected, for access call Phillip Ewert at DOH (360) 236-4326. Next steps for VISTA, are mapping and charting results features. VISTA now has a regional training center for the east side of the mountains in Spokane.

WIC – Jim Hammond

The WIC program developed the SIMS client management system in the summer of '98. It has the ability to interface with bank systems to issue checks out in the field. It manages vendors and list of products. They have had great user acceptance for SIMS, but it's a hassle to maintain the IT side of it. Future goals include: creating a virtual private network, and improving help desk software. The disaster recovery system is planning to be up next year. WIC is planning on changing over to Windows 2000 by Fall of 2002.

HIPAA – Vicki Hohner

Privacy Compliancy date fast approaching (April 2003). Members were given update and resource information. You can apply for a 1- year extension (10-16-03) if you submit a compliance plan by 10-15-02 following the appropriate guidelines. In other HIPAA news: Beginning 10-16-03 there will no longer be paper claims to Medicare. Vicki highlighted the issues for Public Health along with DOH. Steps were given for complying with HIPAA standards.

1. Determine type of covered entity – DOH programs are most likely to be a business associate, then a health plan (contact Vicki Hohner for basic requirements of the different entity types).
2. Compliance options 0 Ranked from least to most expensive (see handout for list).
3. Funding sources - The costs of compliance are to be borne by the program wherever possible.
4. Vendors and contractors – documentation of their compliance efforts and plans to meet the deadlines.
5. Contracts – the DOH contracts office is currently working on contracts language that can be incorporated into all agency contracts as required.
6. Medicaid Requirements – Medicaid relationships, especially those involving funding, will carry HIPAA requirements. If the program has funding ties with Medicaid, Medicaid will drive the requirements.
7. Local Codes. As of 10-17-2002, these codes will no longer be accepted.
8. HIPAA imposes privacy and security requirements that at this point DOH will apply generally across the entire agency.
9. Medicaid has an interagency Communications TAG that has taken the initiative to try to reach providers and other groups with this information.

Another helpful feature is the eForms web site: www.ehealthconsortium.org

WEDSS – Greg Smith

Update on PHIMS 90% of design and 40% of construction complete. Ready for use by end of 2002. It is designed to take the place of 13 different databases currently being used.

SECURES (State Electronic Communication Urgent Response & Exchange System) helps Public Health communicate and collaborate matters of urgency. Telephone call-down system for matters of public health urgency – operates on privileges associated with professional roles.

Emessaging – Secure electronic transfer of notifiable condition data from laboratories and clinical settings.

Health Alert Network – Secure information technology infrastructure for electronic interchange of pertinent health data and health information.

Birth Defects Surveillance System – Integrates elements of OHIMS, DCD, and eMessaging to allow for an adaptable and flexible system that: tracks selected birth defect events, receives information electronically from the clinical setting, and stores information in the Disease Condition Database.

SENTRY (the new Drinking Water system)– Frank Westrum
Started construction in 2001. Phase 1 includes user acceptance. Water facilities, listing of single value data from water source. Phase 2 has multiple value data, and certified operators. Operational date is late spring 2003.

Other DOH/LHJ Interacting Systems – Frank Westrum
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LHJ Infrastructure Inventory Survey – All
Access any systems that are accepted and work for any LHJ now. Pros and Cons needed. Need to narrow down what questions we need to ask. What are we doing now to meet the 13 Visioning process. Need to hire someone (inside or outside the company) to visit each county and access Infrastructure Inventory. Option of hiring a firm to create a pilot test tool for counties was suggested.
Next steps – Collect job descriptions
          Draft CQ
          Send out draft to committee
          First priority job specifications
          Draft inventory instrument
          Pilot test tools on a few counties

PHIT website discussion and content – All
Contents to include: Roster, Mission Statement, Vision, 13 process steps, agenda, minutes, calendar of future meetings, working documents, and map to facility.
PHIT website should be up by the end of February 2002.

Open discussion of any issues – All
Nursing directors Group – need to learn how to effectively manage the information coming in every day. Think about what we could do to help them out with that.